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**\*BIBDATASHEET\***

CONFIRMATION NO. 2155

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APPLICANTS

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**\*\* CONTINUING DATA \*\*\*\*\***  
 This application is a 371 of PCT/US99/24331 10/19/1999  
 which claims benefit of 60/104,737 10/19/1998

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY CA	SHEETS DRAWING	TOTAL CLAIMS 279	INDEPENDENT CLAIMS 21
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Verified and Acknowledged  
 Examiner's Signature: *[Signature]* Initials: *[Initials]*

ADDRESS  
 26259  
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TITLE  
 METHOD OF DIAGNOSING, MONITORING, STAGING, IMAGING AND TREATING PROSTATE CANCER

FILING FEE  RECEIVED 1436	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue )
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